

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 08:00 AM
Secretary of State

DOCUMENT # F01000006619	
1. Entity Name VIACOM TELEVISION STATIONS INC.	



Principal Place of Business 1515 BROADWAY NEW YORK, NY 10036	Mailing Address C/O MICHAEL D. FRICKLAS 1515 BROADWAY NEW YORK, NY 10036
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03222004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 13-4179765	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525
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**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when retesting) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

U000000128718
04/26/04-80050-002 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PR MOONVES, LESLIE J 555 MELROSE AVENUE LOS ANGELES, CA 90038
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVPS FRICKLAS, MICHAEL D 1515 BROADWAY NEW YORK, NY 10036
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVPT FREEDLINE, ROBERT 1515 BROADWAY NEW YORK, NY 10036
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP GORDON, SUSAN G 1515 BROADWAY NEW YORK, NY 10036
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS FUERST, JANE R 1515 BROADWAY NEW YORK, NY 10036
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jane R. Fuerst Jane R. Fuerst, Asst. Secy 3/22/04 212 258 6847
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #